

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
-----------------------------------	---	--

1.0	PHA Information PHA Name: PORTSMOUTH HOUSING AUTHORITY PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 01/2012 PHA Code: NH-004					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 421 Number of HCV units: 406					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
	PHA 1:				PH	HCV
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: Sections 5.1 and 5.2 not applicable this year.					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. Sections 5.1 and 5.2 not applicable this year.					

PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

1. Eligibility, Selection, Admissions Policies – The ACOP & Section 8 Admin Plan have been updated with all HUD-mandated changes that have occurred over the past year. Discretionary changes include:

a. “The PHA will document, at its discretion, either with photographs or video tape, all inspections. The photographs or video tapes will not include any persons residing in the dwelling unit and will be used solely to document the condition of the dwelling unit at the time of inspection.” – Public Housing only

b. Two new sections on “Grounds for Termination:

(1) Allowing a guest to remain in the assisted unit longer than 14 consecutive days or a total of 14 cumulative calendar days during any 12 month period.

Children who are subject to a joint custody arrangement or for whom a family has visitation privileges, who are not included as a family member because they live outside of the assisted household more than 50 percent of the time, are not subject to the time limitations of guests as described above. This provision will apply only when the PHA has been provided with and approved of proof of joint custody and/or visitation privileges. – both Public Housing and Section 8

A family may request an exception to this policy for valid reasons (e.g., care of a relative recovering from a medical procedure that is expected to last 40 consecutive days). An exception will not be made unless the family can identify and provide documentation of the residence to which the guest will return. – Public Housing

(2) Allowing any individuals who have been barred from PHA property to be on PHA premises or in a PHA dwelling unit. The names of persons barred from PHA properties are posted in all PHA site offices. – Public Housing

c. Informal Hearings for Participants, PHA will send the Final Decision to the family "postage pre-paid, registered, return receipt requested" – Section 8

2. Financial Resources – The Portsmouth Housing Authority's financial resources are continuously changing due to the amount of subsidy that is provided by HUD and the changing rental income based upon the families that occupy our units. A listing of Financial Resources is a Supporting Document to the Annual Plan

3. Rent Determinations – The ACOP & Section 8 Admin Plan have been updated with all HUD-mandated changes that have occurred over the past year. Discretionary changes include:

a. “Families are required to report all increases or decreases in income, including new employment, and increases or decreases in allowable expenses within 10 calendar days of the date the change takes effect. The changes must be reported, in writing, within ten (10) calendar days of the change” – both Public Housing and Section 8

4. Operations and Management – PHA has an Emergency Preparedness Plan

5. Grievance Procedures – No changes proposed

6. Designated Housing for Elderly and Disabled Families – The Portsmouth Housing Authority has determined that there cannot be a Designated Housing Plan at this time. The PHA hired a consultant, The Schiff Group, to study this plan, and it has been determined that at this point in time, the needs of the elderly and the non-elderly disabled population are proportionate. If the PHA anticipates the housing needs of these two populations become disproportionate, a Designated Housing Application will be considered again, and the appropriate application process will be undertaken. **Attachment A** provides a summary of possible public housing developments that will be involved.

7. Community Service and Self-Sufficiency – The Portsmouth Housing Authority follows all rules and regulations pertaining to the Community Service requirements proposed by HUD. The PHA does not have a Self-Sufficiency program

8. Safety and Crime Prevention – The PHA is adding exterior security cameras to the Gosling Meadows family development in order to stop problems with drug trafficking, vandalism and speeding within the development. Portsmouth Housing Authority's has a Safety Committee.

9. Pets – The PHA no longer requires a Pet Deposit in the public housing program

10. Civil Rights Certification – No changes

11. Fiscal Year Audit – There have been no findings in the most recent fiscal audit ending December 31, 2010.

12. Asset Management – The PHA has a Maintenance Plan that calls for surveying all assets of the PHA once yearly. The PHA utilizes all of its Capital funds on time and within budgets. The PHA also uses operational funds to keep buildings and units modernized.

13. Violence Against Women Act (VAWA) – No Changes. The VAWA statement is provided in **Attachment B**.

6.0 (cont.)	<p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>Copies at central office and at AMP site offices</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>HOPE VI – No current plans for a HOPE VI Application</p> <p>Mixed-Finance Modernization or Development – No current plans for Mixed-Finance Modernization or Development</p> <p>Demolition and/or Disposition – No current plans for demolition or disposition.</p> <p>Conversion of Public Housing – No current plans for conversions of the public housing inventory.</p> <p>Section 8 Homeownership Program – No current plans for a Section 8 Homeownership Program</p> <p>Public Housing Homeownership Program – No current plans for a Public Housing Homeownership Program</p> <p>Project-Based Vouchers – PHA has project-based 30 vouchers, and may consider project-basing up to an additional 41 vouchers. (See Attachment C)</p> <p>Other – PHA may apply for new programs or incremental units if NOFAs are issued by HUD or other appropriate opportunities are presented.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Attachment D – FY 2012 Capital Fund Program Annual Statement Attachment E – FY 2011 Capital Fund Program Annual Statement Attachment F – FY 2010 Capital Fund Program Performance and Evaluation Report Attachment G – FY 2009 Capital Fund Program Performance and Evaluation Report (2009 Formula Budget) Attachment H – FY 2009 Capital Fund Program Performance and Evaluation Report (2009 Stimulus funding) Attachment I – FY 2008 Capital Fund Program Performance and Evaluation Report</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Attachment J – Capital Fund Program Five-Year Action Plan</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p>PHA does not have any current plans on participating in the CFFP</p>

9.0

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI (2000)	963	5	5	5	5	5	5
Income >30% but <=50% of AMI (2000)	527	5	5	5	5	5	5
Income >50% but <80% of AMI(2000)	962	3	3	3	3	3	3
Elderly (2000)	875	5	5	5	5	5	5
Families with Disabilities (2000)	755	5	5	5	5	5	5
African American (2000 estimate)	136	5	5	5	5	5	5
Other Ethnic Groups (2000 estimate)	172	5	5	5	5	5	5

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s
Indicate year: FY 2006-2010 Consolidated Plan
- ☒ U.S. Census data (2000)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

Housing Needs of Families on the Waiting List – PUBLIC HOUSING			
	# of families	% of total families	Annual Turnover
Waiting list total	249		48
Extremely low income <=30% AMI	214	86%	
Very low income (>30% but <=50% AMI)	30	12%	
Low income (>50% but <80% AMI)	5	2%	
Families with children	53	21%	
Elderly families	72	29%	
Families with Disabilities	79	32%	
Race/ethnicity - White	181	73%	
Race/ethnicity - Black	8	3%	
Race/ethnicity - Hispanic	16	6%	
Race/ethnicity - Native American	1	<1%	
Race/ethnicity - Asian	6	2%	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	34	12%	3
1BR	140	59%	31
2 BR	29	16%	8
3 BR	24	11%	6
4 BR	2	2%	
5 BR	0		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

9.0	B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists (Continued)																																																							
	<table border="1"> <thead> <tr> <th colspan="4">Housing Needs of Families on the Waiting List – SECTION 8</th> </tr> <tr> <th></th><th># of families</th><th>% of total families</th><th>Annual Turnover</th></tr> </thead> <tbody> <tr> <td>Waiting list total</td><td>209</td><td></td><td>10</td></tr> <tr> <td>Extremely low income <=30% AMI</td><td>179</td><td>86%</td><td></td></tr> <tr> <td>Very low income (>30% but <=50% AMI)</td><td>28</td><td>13%</td><td></td></tr> <tr> <td>Low income (>50% but <80% AMI)</td><td>2</td><td>1%</td><td></td></tr> <tr> <td>Families with children</td><td>78</td><td>37%</td><td></td></tr> <tr> <td>Elderly families</td><td>31</td><td>15%</td><td></td></tr> <tr> <td>Families with Disabilities</td><td>73</td><td>35%</td><td></td></tr> <tr> <td>Race/ethnicity - White</td><td>151</td><td>72%</td><td></td></tr> <tr> <td>Race/ethnicity - Black</td><td>14</td><td>7%</td><td></td></tr> <tr> <td>Race/ethnicity - Hispanic</td><td>22</td><td>11%</td><td></td></tr> <tr> <td>Race/ethnicity - Native American</td><td>1</td><td><1%</td><td></td></tr> <tr> <td>Race/ethnicity - Asian</td><td>6</td><td>3%</td><td></td></tr> </tbody> </table> <p> Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes </p>	Housing Needs of Families on the Waiting List – SECTION 8					# of families	% of total families	Annual Turnover	Waiting list total	209		10	Extremely low income <=30% AMI	179	86%		Very low income (>30% but <=50% AMI)	28	13%		Low income (>50% but <80% AMI)	2	1%		Families with children	78	37%		Elderly families	31	15%		Families with Disabilities	73	35%		Race/ethnicity - White	151	72%		Race/ethnicity - Black	14	7%		Race/ethnicity - Hispanic	22	11%		Race/ethnicity - Native American	1	<1%		Race/ethnicity - Asian	6	3%
Housing Needs of Families on the Waiting List – SECTION 8																																																								
	# of families	% of total families	Annual Turnover																																																					
Waiting list total	209		10																																																					
Extremely low income <=30% AMI	179	86%																																																						
Very low income (>30% but <=50% AMI)	28	13%																																																						
Low income (>50% but <80% AMI)	2	1%																																																						
Families with children	78	37%																																																						
Elderly families	31	15%																																																						
Families with Disabilities	73	35%																																																						
Race/ethnicity - White	151	72%																																																						
Race/ethnicity - Black	14	7%																																																						
Race/ethnicity - Hispanic	22	11%																																																						
Race/ethnicity - Native American	1	<1%																																																						
Race/ethnicity - Asian	6	3%																																																						
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>Portsmouth Housing Authority is seeking to develop additional units of housing using a variety of resources.</p> <p>Portsmouth Housing Authority will also continue to:</p> <p>Employ effective maintenance and management policies to minimize the number of public housing units off-line</p> <p>Reduce turnover time for vacated public housing units</p> <p>Reduce time to renovate public housing units</p> <p>Maintain or increase section 8 lease-up rates by establishing payment standards that will increase the ability of families to rent throughout the jurisdiction</p> <p>Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program</p> <p>Participate in the Consolidated Plan development process to ensure coordination with broader community strategies</p>																																																							

10.0	Additional Information. Describe the following, as well as any additional information HUD has requested.																
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.																
	The following table reflects the progress we have made to date in achieving the goals and objectives established for fiscal years 2010 - 2014:																
	<table border="1"> <tr> <th colspan="2" data-bbox="302 365 911 386">GOAL: EXPAND THE SUPPLY OF ASSISTED HOUSING</th></tr> <tr> <th data-bbox="302 386 911 417">Objective</th><th data-bbox="911 386 1528 417">Progress</th></tr> <tr> <td data-bbox="302 417 911 522">Apply for additional rental vouchers if they become available</td><td data-bbox="911 417 1528 522">The PHA converted 30 Tenant-Based Vouchers to 30 Project-Based vouchers in order to replace 30 Section 8 Certificates at the Atlantic Heights housing development.</td></tr> <tr> <td data-bbox="302 522 911 627">Leverage private or other public funds to create additional housing opportunities</td><td data-bbox="911 522 1528 627">The PHA was awarded \$5,700,000 in tax credit, bond financing, Greener Homes, and CDBG funding to renovate 100 units at Wamesit Place.</td></tr> <tr> <td data-bbox="302 627 911 722">Acquire or build units or developments</td><td data-bbox="911 627 1528 722">We are still trying to negotiate with a local developer to purchase 53 affordable units at the Keefe House that is a project with expiring tax credit units that we wish to keep affordable.</td></tr> </table>	GOAL: EXPAND THE SUPPLY OF ASSISTED HOUSING		Objective	Progress	Apply for additional rental vouchers if they become available	The PHA converted 30 Tenant-Based Vouchers to 30 Project-Based vouchers in order to replace 30 Section 8 Certificates at the Atlantic Heights housing development.	Leverage private or other public funds to create additional housing opportunities	The PHA was awarded \$5,700,000 in tax credit, bond financing, Greener Homes, and CDBG funding to renovate 100 units at Wamesit Place.	Acquire or build units or developments	We are still trying to negotiate with a local developer to purchase 53 affordable units at the Keefe House that is a project with expiring tax credit units that we wish to keep affordable.						
GOAL: EXPAND THE SUPPLY OF ASSISTED HOUSING																	
Objective	Progress																
Apply for additional rental vouchers if they become available	The PHA converted 30 Tenant-Based Vouchers to 30 Project-Based vouchers in order to replace 30 Section 8 Certificates at the Atlantic Heights housing development.																
Leverage private or other public funds to create additional housing opportunities	The PHA was awarded \$5,700,000 in tax credit, bond financing, Greener Homes, and CDBG funding to renovate 100 units at Wamesit Place.																
Acquire or build units or developments	We are still trying to negotiate with a local developer to purchase 53 affordable units at the Keefe House that is a project with expiring tax credit units that we wish to keep affordable.																
	<table border="1"> <tr> <th colspan="2" data-bbox="302 785 911 806">GOAL: IMPROVE THE QUALITY OF ASSISTED HOUSING</th></tr> <tr> <th data-bbox="302 806 911 837">Objective</th><th data-bbox="911 806 1528 837">Progress</th></tr> <tr> <td data-bbox="302 837 911 1173">Increase customer satisfaction</td><td data-bbox="911 837 1528 1173">We continue to work with our Jurisdiction-Wide Resident Council . We have completed the new paving projects at Gosling Meadows and Woodbury Manor. We have installed new windows at Atlantic Heights and we will be replacing all roofs at this development in September, 2011. We have completed the renovations to the office at Gosling Meadows and it now meets ADA rules and regulations. We are installing a video surveillance system at Gosling Meadows to improve security at this development and to help prevent drug related criminal activity. We are installing new roofs at Woodbury, State and Pleasant Street housing developments in September, 2011. In 2012 we will be replacing all asbestos floors at Gosling Meadows.</td></tr> <tr> <td data-bbox="302 1173 911 1299">Concentrate on efforts to improve specific management functions: Review PHA operations, implement recommendations in management reviews, improve unit turnover in public housing operations</td><td data-bbox="911 1173 1528 1299">Unit turnovers have not been a problem as we continuously remain at full occupancy. We are installing a new telephone system to help improvement management functions.</td></tr> <tr> <td data-bbox="302 1299 911 1425">Renovate or modernize public housing units</td><td data-bbox="911 1299 1528 1425">We are constantly renovating our public housing units with the capital funds that are provided each year. We have also applied for low income tax credits to totally modernize a 100-unit HUD 236 development. (See customer satisfaction above.)</td></tr> <tr> <td data-bbox="302 1425 911 1530">Manage the Portsmouth Housing Authority's existing Public Housing and Section Eight Programs in an efficient and effective manner</td><td data-bbox="911 1425 1528 1530">We are still a High Performer in both the Public Housing Assessment System (PHAS) and the Section 8 Management Assessment Program (SEMAP).</td></tr> <tr> <td data-bbox="302 1530 911 1604">Continue to Qualify as a SEMAP high performer through December 31, 2014</td><td data-bbox="911 1530 1528 1604">We are in High Performer status.</td></tr> <tr> <td data-bbox="302 1604 911 1667">Continue to Qualify as a PHAS high performer through December 31, 2014</td><td data-bbox="911 1604 1528 1667">We are in High Performer status.</td></tr> </table>	GOAL: IMPROVE THE QUALITY OF ASSISTED HOUSING		Objective	Progress	Increase customer satisfaction	We continue to work with our Jurisdiction-Wide Resident Council . We have completed the new paving projects at Gosling Meadows and Woodbury Manor. We have installed new windows at Atlantic Heights and we will be replacing all roofs at this development in September, 2011. We have completed the renovations to the office at Gosling Meadows and it now meets ADA rules and regulations. We are installing a video surveillance system at Gosling Meadows to improve security at this development and to help prevent drug related criminal activity. We are installing new roofs at Woodbury, State and Pleasant Street housing developments in September, 2011. In 2012 we will be replacing all asbestos floors at Gosling Meadows.	Concentrate on efforts to improve specific management functions: Review PHA operations, implement recommendations in management reviews, improve unit turnover in public housing operations	Unit turnovers have not been a problem as we continuously remain at full occupancy. We are installing a new telephone system to help improvement management functions.	Renovate or modernize public housing units	We are constantly renovating our public housing units with the capital funds that are provided each year. We have also applied for low income tax credits to totally modernize a 100-unit HUD 236 development. (See customer satisfaction above.)	Manage the Portsmouth Housing Authority's existing Public Housing and Section Eight Programs in an efficient and effective manner	We are still a High Performer in both the Public Housing Assessment System (PHAS) and the Section 8 Management Assessment Program (SEMAP).	Continue to Qualify as a SEMAP high performer through December 31, 2014	We are in High Performer status.	Continue to Qualify as a PHAS high performer through December 31, 2014	We are in High Performer status.
GOAL: IMPROVE THE QUALITY OF ASSISTED HOUSING																	
Objective	Progress																
Increase customer satisfaction	We continue to work with our Jurisdiction-Wide Resident Council . We have completed the new paving projects at Gosling Meadows and Woodbury Manor. We have installed new windows at Atlantic Heights and we will be replacing all roofs at this development in September, 2011. We have completed the renovations to the office at Gosling Meadows and it now meets ADA rules and regulations. We are installing a video surveillance system at Gosling Meadows to improve security at this development and to help prevent drug related criminal activity. We are installing new roofs at Woodbury, State and Pleasant Street housing developments in September, 2011. In 2012 we will be replacing all asbestos floors at Gosling Meadows.																
Concentrate on efforts to improve specific management functions: Review PHA operations, implement recommendations in management reviews, improve unit turnover in public housing operations	Unit turnovers have not been a problem as we continuously remain at full occupancy. We are installing a new telephone system to help improvement management functions.																
Renovate or modernize public housing units	We are constantly renovating our public housing units with the capital funds that are provided each year. We have also applied for low income tax credits to totally modernize a 100-unit HUD 236 development. (See customer satisfaction above.)																
Manage the Portsmouth Housing Authority's existing Public Housing and Section Eight Programs in an efficient and effective manner	We are still a High Performer in both the Public Housing Assessment System (PHAS) and the Section 8 Management Assessment Program (SEMAP).																
Continue to Qualify as a SEMAP high performer through December 31, 2014	We are in High Performer status.																
Continue to Qualify as a PHAS high performer through December 31, 2014	We are in High Performer status.																
	<table border="1"> <tr> <th colspan="2" data-bbox="302 1730 911 1751">GOAL: INCREASE ASSISTED HOUSING CHOICES</th></tr> <tr> <th data-bbox="302 1751 911 1782">Objective</th><th data-bbox="911 1751 1528 1782">Progress</th></tr> <tr> <td data-bbox="302 1782 911 1856">Provide voucher mobility counseling</td><td data-bbox="911 1782 1528 1856">Many of our current Section 8 participants are mobile and we continually offer assistance to these families.</td></tr> </table>	GOAL: INCREASE ASSISTED HOUSING CHOICES		Objective	Progress	Provide voucher mobility counseling	Many of our current Section 8 participants are mobile and we continually offer assistance to these families.										
GOAL: INCREASE ASSISTED HOUSING CHOICES																	
Objective	Progress																
Provide voucher mobility counseling	Many of our current Section 8 participants are mobile and we continually offer assistance to these families.																

10.0

(a) Progress in Meeting Mission and Goals. (Continued from previous page)

GOAL: PROVIDE AN IMPROVED LIVING ENVIRONMENT	
Objective	Progress
Implement public housing security improvements	We are installing video surveillance systems at both Gosling Meadows and Wamesit Place family housing development.
Designate developments or buildings for particular resident groups (elderly, persons with disabilities) The PHA is considering designating portions of developments for non-elderly disabled only	We have not been successful in developing designated housing due to the equal needs of both populations. Should these needs change, we will consider submitting an application.
Promote the creation of resident associations at each development	We have a new Jurisdiction-Wide Resident Council after voting.

GOAL: PROMOTE SELF-SUFFICIENCY AND ASSET DEVELOPMENT OF ASSISTED HOUSEHOLDS	
Objective	Progress
Provide improved social services and educational opportunities for residents	We are applying for a ROSS Social Services program in December, 2011.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

Portsmouth Housing Authority has adopted the following definition of substantial deviation and significant amendment or modification:

A. Substantial Deviation from the 5-year Plan:

A "Substantial Deviation" from the 5-Year Plan is an overall change in the direction of the Authority pertaining to the Authority's Goals and Objectives. This includes changing the Authority's Goals and Objectives.

B. Significant Amendment or Modification to the Annual Plan:

A "Significant Amendment or Modification" to the Annual Plan is a change in a policy or policies pertaining to the operation of the Authority. This includes the following:

- Changes to rent or admissions policies or organization of the waiting list.
- Additions of non-emergency work items over \$50,000(items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.

An exception to the above definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements since HUD does not consider such changes significant amendments.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. <p><u>See Attachment K</u></p> <ul style="list-style-type: none"> (g) Challenged Elements <p><u>See Attachment L</u></p> <ul style="list-style-type: none"> (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
------	---

Attachment A

Portsmouth Housing Authority

Annual Agency Plan Fiscal Year 1/01/2012 – 12/31/2012

Designation of Public Housing

The Portsmouth Housing Authority hired a consultant, The Schiff Group, to study the feasibility of a Designated Housing Plan. It has been determined that for the interim, the needs of the elderly and the non-elderly disabled population are proportionate. If the PHA anticipates the housing needs of these two populations become disproportionate, a Designated Housing Application will be considered again, and the appropriate application process will be undertaken.

If that is the case, PHA will plan to apply for designation of three developments in the Fiscal year that begins January 1, 2012. PHA's anticipated Activity Description is provided in the tables that follow:

Designation of Public Housing Activity Description
1a. Development name: Woodbury Manor, State Street and Pleasant Street 1b. Development (project) number: NH-004-2
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input checked="" type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(06/01/2012)</u>
5. If approved, will this designation constitute a (select one) <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 60 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development (20 units Elderly Families only; 40 units Families with disabilities only)

Designation of Public Housing Activity Description
1a. Development name: Feaster Apartments
1b. Development (project) number: NH-004-3
2. Designation type: Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (06/01/2012)
5. If approved, will this designation constitute a (select one) <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
7. Number of units affected: 100
7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

Designation of Public Housing Activity Description
1a. Development name: Margeson Apartments
1b. Development (project) number: NH-004-6
2. Designation type: ** Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (06/01/2012)
5. If approved, will this designation constitute a (select one) <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
8. Number of units affected: 137
7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

**** Designation type and number of units described above may be altered slightly following analysis of PHA's waiting lists, current occupancy patterns, housing needs in the jurisdiction, alternate housing resources in the jurisdiction, etc.**

Attachment B

Portsmouth Housing Authority Annual Agency Plan

Fiscal Year 1/1/2012 – 12/31/2012

Violence Against Women Act (VAWA) Report

A goal of the Portsmouth Housing Authority is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the degree we can.

The Portsmouth Housing Authority provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.

Portsmouth Housing Authority refers clients to the following groups for assistance:

New Hampshire Coalition Against Domestic & Sexual Violence, Concord, NH
Portsmouth Police Department, Portsmouth, NH
Legal Advice & Referral Center (LARC), Concord, NH
Jaden's Ladder, Rye, NH

The Portsmouth Housing Authority provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

As client referrals are received from domestic violence advocacy groups, apparently eligible clients are placed on our waiting lists. For persons already living in a Housing Authority or Housing Choice Voucher unit who become victims as described, and/or those who cannot be immediately assisted, these are referred to:

City of Portsmouth Welfare Department, Portsmouth, NH
New Hampshire Housing & Finance Authority, Manchester, NH
Legal Advice & Referral Center (LARC), Concord, NH
Jaden's Ladder, Rye, NH

The Portsmouth Housing Authority provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

Portsmouth Housing Authority refers clients to the following groups for assistance:

New Hampshire Coalition Against Domestic & Sexual Violence, Concord, NH
Legal Advice & Referral Center (LARC), Concord, NH
Jaden's Ladder, Rye, NH

The Portsmouth Housing Authority has the following procedures in place to assure applicants and residents are aware of their rights under the Violence Against Women Act:

All residents and Section 8 participants have been notified of their rights and responsibilities under the Violence Against Women Act.

The orientation for new residents and participants includes information on their rights and responsibilities under the Violence Against Women Act.

The Admissions & Continued Occupancy Policy (ACOP), Public Housing Dwelling Lease, and Section 8 Administrative Plan have been revised to include screening and termination language related to the Violence Against Women Act

Attachment C

Portsmouth Housing Authority

Annual Agency Plan Fiscal Year 1/01/2012 – 12/31/2012

Intent to Use Project-Based Assistance

☒ Yes ☐ No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1. ☒ Yes ☐ No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:

- ☐ low utilization rate for vouchers due to lack of suitable rental units
- ☐ access to neighborhoods outside of high poverty areas
- ☒ other (describe below:)

To provide vouchers to be used in the City of Portsmouth and adjoining communities for new tax credit developments

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

PHA has project-based 30 units at Atlantic Heights under the LIHTC program in the City of Portsmouth

Up to an additional 41 units may be project-based within the City of Portsmouth and adjoining communities

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-12 Replacement Housing Factor Grant No: Date of CFFP: 09/21/2012			FFY of Grant: 2012 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	55090			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	44,990			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	350,815			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	550,895	550,895		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

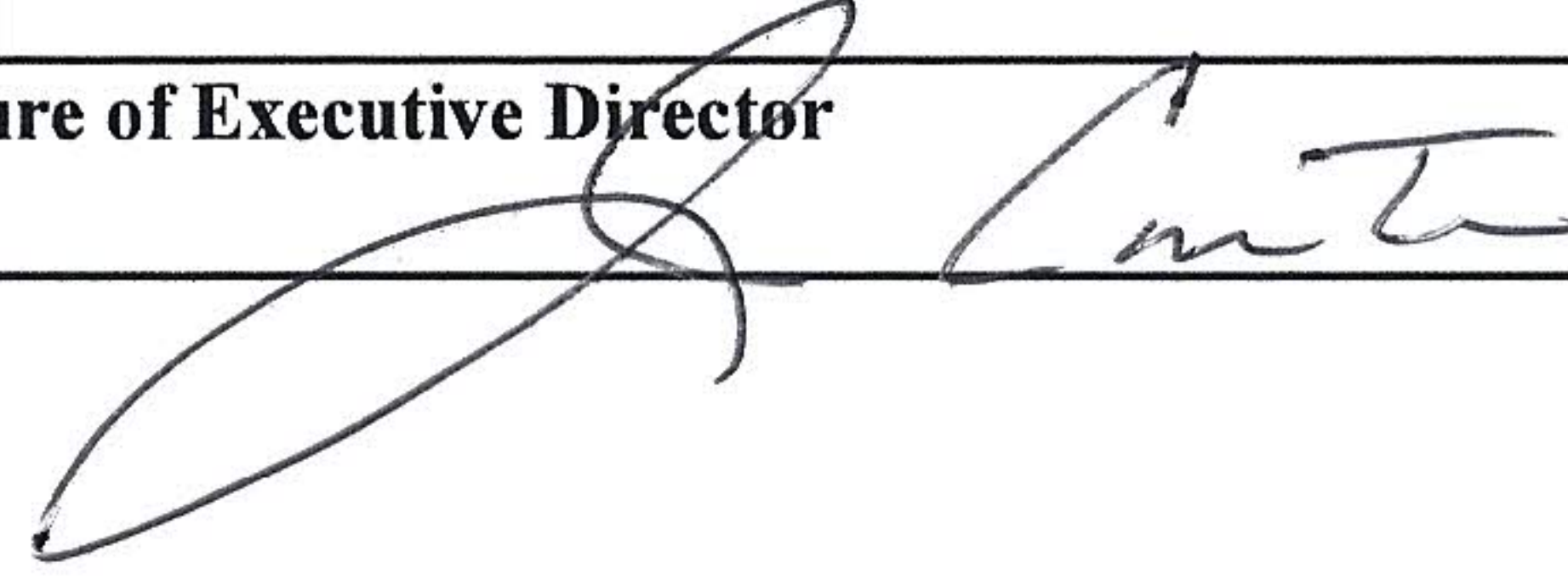
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-12 Replacement Housing Factor Grant No: Date of CFFP: 09/21/2012			FFY of Grant: 2012 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 09/21/2011		Signature of Public Housing Director Date	

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Portsmouth Housing Authority					Federal FFY of Grant: 2012
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Operations	10/01/2012		10/01/2015		
Administration	10/01/2012		10/01/2015		
Fees and Costs	10/15/2012		10/15/2015		
Dwelling Structures	11/15/2012		11/15/2015		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-12 Replacement Housing Factor Grant No: Date of CFFP: 09/21/2011			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000	100,000		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	64,000	55,090		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	44,990	44,990		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	341,905	350,815		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	550,895	550,895		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

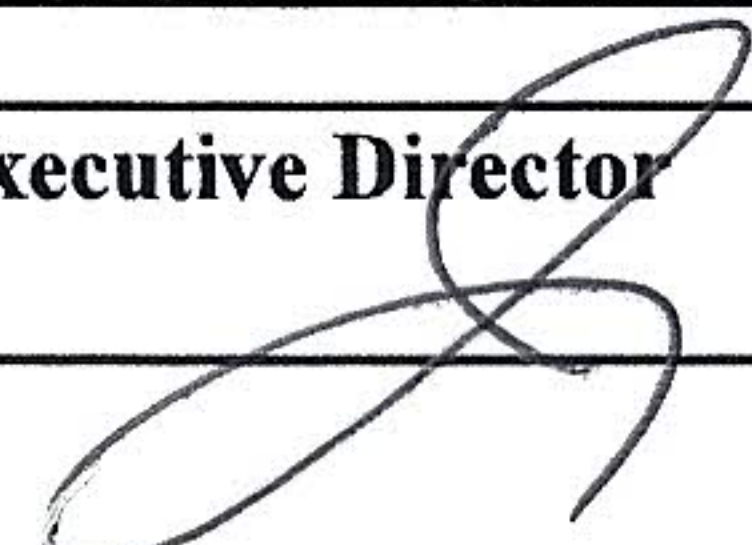
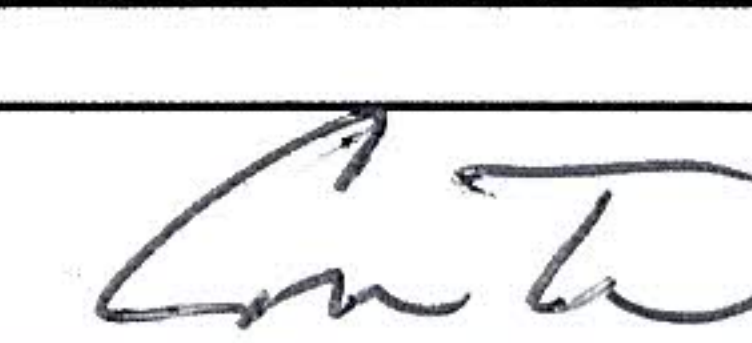
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-11 Replacement Housing Factor Grant No: Date of CFFP: 09/21/2011			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 09/21/2011		Signature of Public Housing Director  Date	

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part II: Supporting Pages								
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1	Operations	1460	LS	100,000	100,000			
	PHA Operating Costs							
COCC	Administration	1410	LS	64,000	55,090			
	Management Fee							
AMP 1	Fees and Costs	1430	LS	44,990	44,990			
	Architectural/Engineering Costs							
AMP 1	Dwelling Structures	1460	32	341,905	350,815			
	Replace all Roofs at							
	Gosling Meadows							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Portsmouth Housing Authority					Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Operations	10/01/2011	10/01/2011	10/01/2014		
Administration	10/01/2011	10/01/2011	10/01/2014		
Fees and Costs	10/15/2011		10/15/2014		
Dwelling Structures	11/15/2011		11/15/2014		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-10 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: <u>1</u>) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000		100,000	100,000
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	63,650			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	44,990			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	357,865		200,000	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	70,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$636,505		\$200,000	\$100,000

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: <u>1</u>) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director Joseph N. Couture		Date 9-29-2011		Signature of Public Housing Director Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number			Federal FFY of Grant: 2010			
Portsmouth Housing Authority		Capital Fund Program Grant No: NH36 P004 501-10 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Operations	1406						
AMP 1	PH Operating Costs		LS	54,000		54,000	54,000	Complete
AMP 2	PH Operating Costs		LS	46,000		46,000	46,000	Complete
	Subtotal 1406			100,000		100,000	100,000	
	Administration	1410						
COCC	Management Fee		LS	63,650				
	Subtotal 1410			63,650				
	Fees and Costs	1430						
AMP 1 (NH 4-2)	Architectural/Engineering Costs		LS	44,990				
	Subtotal 1430			44,990				
	Dwelling Structures	1460						
AMP 1 (NH 4-2)	Roof Replacement/Trim Work at Woodbury Manor, State and Pleasant		LS	357,685		200,000		
	Subtotal 1460			357,865		200,000		
	Non-Dwelling Equipment	1475						
AMP 2 (NH 4-6)	Replace Elevator			-0-				
AMP 1 (NH 4-1)	Install Security Camera System at Gosling Meadows			70,000				
	Subtotal 1475			70,000				
	Total Grant			\$636,505		\$300,000	\$100,000	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

**Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-09 Replacement Housing Factor Grant No: Date of CFFP: 1/1/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$100,000		\$100,000	\$100,000
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$54,835		\$54,835	\$54,835
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$40,000		\$40,000	\$40,000
8	1440 Site Acquisition				
9	1450 Site Improvement	\$317,863		\$317,863	\$317,863
10	1460 Dwelling Structures	\$128,817		\$128,817	\$128,817
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$641,515		\$641,515	\$641,515

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-09 Replacement Housing Factor Grant No: Date of CFFP: /1/1/2009		FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: <u>1</u>) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost¹	
		Original	Revised²	Obligated	Expended
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director Joseph N. Couture		Date 10-14-2011		Signature of Public Housing Director Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number			Federal FFY of Grant: 2009			
Portsmouth Housing Authority		Capital Fund Program Grant No: NH36 P004 501-09 Replacement Housing Factor Grant No: Date of CFFP: 1/1/2009						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA 4-1	Operations	1406		\$54,000		\$54,000	\$54,000	
PHA 4-1	Operations	1406	LS	\$46,000		\$46,000	\$46,000	
PHA COCC	Salaries & Wages	1410	LS	\$54,835		\$54,835	\$54,835	
PHA 4-1	Fees & Costs	1430	LS	\$20,000		\$20,000	\$20,000	
PHA 4-6	Fees and Costs	1430	LS	\$20,000		\$20,000	\$20,000	
NH 4-1	Site work, roads, sidewalk and sewer extinction	1450	LS	\$317,863		\$317,863	\$317,863	
NH 4-1	Change from oil heat to gas heat-new gas boilers	1460	35	0				
NH 4-6	Replace elevators	146	2	\$128,817		\$128,817	\$128,817	
	TOTAL			\$641,515		\$641,515	\$641,515	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Portsmouth Housing Authority					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
					Part III Not Applicable – Portsmouth Housing Authority is not participating in the Capital Fund Financing Program

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 8/31/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: American Recovery and Reinvestment Act Replacement Housing Factor Grant No: NH36S00450109 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	0			
3	1408 Management Improvements	0			
4	1410 Administration (may not exceed 10% of line 21)	\$25,000		\$25,000	\$25,000
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	\$66,000		\$66,000	\$66,000
8	1440 Site Acquisition	0			
9	1450 Site Improvement	\$652,785		\$652,785	\$652,785
10	1460 Dwelling Structures	0			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Non-dwelling Structures	0			
13	1475 Non-dwelling Equipment	\$20,000		\$20,000	\$20,000
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: American Recovery and Reinvestment Act Replacement Housing Factor Grant No: NH36S00450109 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$763,785		\$763,785	\$763,785
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director Joseph N. Couture		Date 09-23-2011		Signature of Public Housing Director Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

PHA Name: Portsmouth Housing Authority	Grant Type and Number Capital Fund Program Grant No: ARRA CFFP (Yes/ No): Replacement Housing Factor Grant No:	Federal FFY of Grant: 2009
--	--	-----------------------------------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Portsmouth Housing Authority					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NH 4-1	08-01-2009		08-001-2010	12-30-2010	
NH 4-3	08-01-2009		08-001-2010	12-30-2010	
NH 4-6	08-01-2009		08-001-2010	12-30-2010	
HA-Wide Fees & Costs	04-30-2009		08-30-2010	12-30-2010	
HA-Wide Administration	04-30-2009		08-30-2010	12-30-2010	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2008 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$100,000	\$100,000	\$100,000	\$100,000
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$54,835	\$50,062	\$50,062	\$54,835
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$40,000	\$44,773	\$44,773	\$40,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$408,565	\$408,565	\$408,565	\$408,565
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$603,400	\$603,400	\$603,400	\$603,400

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-08 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director Joseph N. Couture		Date 09-29-2011		Signature of Public Housing Director Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Portsmouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: NH36 P004 501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NH 4-1	Change from oil heat to gas heat new boilers	1460	100%	\$321,263	\$321,263	\$321,263	\$321,263	
NH 4-3	Replace Elevators	1460	100%	\$87,302	\$87,302	\$87,302	\$87,302	
HA Wide	Salaries	1410	100%	\$54,835	\$50,062	\$50,062	\$54,835	
HA Wide	Operations	1406		\$100,000	\$100,000	\$100,000	\$100,000	
Fee Costs	A&E Services	1430		\$40,000	\$44,773	\$44,773	\$40,000	
	Total			\$603,400	\$603,400	\$603,400	\$603,400	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NH 4-1	9/30/2010	9/29/2009	6/12/2012	11/10/2010	
NH 4-3	9/30/2010	9/29/2009	6/12/2012	11/10/2010	
HA Wide Admin	9/30/2010	9/29/2009	6/12/2012	11/10/2010	
HA Wide Fees & Costs	9/30/2010	9/29/2009	6/12/2012	11/10/2010	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary						
PHA Name/Number Portsmouth Housing Authority - NH 004		Locality (City/County & State) City of Portsmouth, NH		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY Grant: 2013 PHA FY: 1/01/2013 – 12/31/2013	Work Statement for Year 3 FFY Grant: 2014 PHA FY: 1/01/2014 – 12/31/2014	Work Statement for Year 4 FFY Grant: 2015 PHA FY: 1/01/2015 – 12/31/2015	Work Statement for Year 5 FFY Grant: 2016 PHA FY: 1/01/2016 – 12/31/2016
B.	Physical Improvements Subtotal 1460 Account	Annual Statement	350,815	350,815	350,815	350,815
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		55,090	55,090	55,090	55,090
F.	Other 1430 Account		44,990	44,990	44,990	44,990
G.	Operations		100,000	100,000	100,000	100,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		550,895	550,895	550,895	550,895
L.	Total Non-CFP Funds					
M.	Grand Total		550,895	550,895	550,895	550,895

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary (Continuation)

PHA Name/Number: Portsmouth Housing Authority - NH 004			Locality (City/county & State) City of Portsmouth, NH		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY Grant: 2013 PHA FY: 1/01/2013 – 12/31/2013	Work Statement for Year 3 FFY Grant: 2014 PHA FY: 1/01/2014 – 12/31/2014	Work Statement for Year 4 FFY Grant: 2015 PHA FY: 1/01/2015 – 12/31/2015	Work Statement for Year 5 FFY Grant: 2016 PHA FY: 1/01/2016 – 12/31/2016
		Annual Statement				
	Central Office Cost Center		55,090	55,090	55,090	55,090
	Subtotal COCC		55,090	55,090	55,090	55,090
	AMP 1: NH004000001					
	NH004-1 Gosling Meadows 1460 Account 1430 Account		341,905 44,990			
	NH 004-2- Woodbury, State and Pleasant 1460 Account 1430 Account					350,815 44,990
	Operations		50,000	50,000	50,000	50,000
	Subtotal AMP 1		436,895	50,000	50,000	445,805
	AMP 2: NH004000002					
	NH-004-3: Feaster Apts. 1460 Account 1430 Account		8,910		350,815 44,990	
	NH-004-6: Margeson Apts. 1460 Account 1430 Account			350,815 44,990		
	Operations		50,000	50,000	50,000	50,000
	Subtotal AMP 2		58,910	445,805	445,805	50,000
	TOTAL		\$550,895	\$550,895	\$550,895	\$550,895

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY Grant: 2013 PHA FY: 1/01/2013 – 12/31/2013			Work Statement for Year 3 FFY Grant: 2014 PHA FY: 1/01/2014 – 12/31/2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	<u>Operations-1406</u>			<u>Operations-1406</u>		
	PH Operating Costs-AMP 1	LS	50,000	PH Operating Costs-AMP 1	LS	50,000
	PH Operating Costs-AMP 2	LS	50,000	PH Operating Costs-AMP 2	LS	50,000
	Subtotal-1406		100,000	Subtotal-1406		100,000
	<u>Administration-1410</u>			<u>Administration-1410</u>		
	Management Fee-COCC	LS	55,090	Management Fee-COCC	LS	55,090
	Subtotal-1410		55,090	Subtotal-1410		55,090
	<u>Fees and Costs-1430</u>			<u>Fees and Costs-1430</u>		
	Architectural/Engineering NH 4-1, Gosling Meadows, AMP 1	LS	44,990	Architectural/Engineering NH 4-6, Margeson Apartments, AMP 2	LS	44,990
	Subtotal-1430		44,990	Subtotal-1430		44,990
	<u>Dwelling Structures-1460</u>			<u>Dwelling Structures-1460</u>		
	Replace all Roofs, Exterior Porches, ramps, exterior doors NH 4-1, Gosling Meadows, AMP 1	124	341,905	Replace Elevators, 4-6, Margeson, AMP 2	2	341,905
	Window replacement at NH 4-3, Feaster AMP 2	To be determined	8,910	Plumbing improvements at NH 4-6, Margeson, AMP 2	LS	8,910
	Subtotal-1460		350,815	Subtotal-1460		350,815
	Subtotal of Estimated Cost		\$550,895	Subtotal of Estimated Cost		550,895

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY Grant: 2015 PHA FY: 1/01/2015 – 12/31/2015			Work Statement for Year 5 FFY Grant: 2016 PHA FY: 1/01/2016 – 12/31/2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual	<u>Operations-1406</u>			<u>Operations-1406</u>		
Statement	PH Operating Costs-AMP 1	LS	50,000	PH Operating Costs-AMP 1	LS	50,000
	PH Operating Costs-AMP 2	LS	50,000	PH Operating Costs-AMP 2	LS	50,000
	Subtotal-1406		100,000	Subtotal-1406		100,000
	<u>Administration-1410</u>			<u>Administration</u>		
	Management Fee-COCC	LS	55,090	Management Fee-COCC	LS	55,090
	Subtotal-1410		55,090	Subtotal-1410		55,090
	<u>Fees and Costs-1430</u>			<u>Fees and Costs-1430</u>		
	Architectural/Engineering NH 4-3, Feaster Apts.-AMP 2	LS	44,990	Architectural/Engineering State, Pleasant, and Woodbury Manor NH 4-2, AMP 1	LS	44,990
	Subtotal-1430		44,990	Subtotal-1430		44,990
	<u>Dwelling Structures-1460</u>			<u>Dwelling Structures-1460</u>		
	Replace all apartment floors NH 4-3, Feaster Apts. AMP 2	100	341,905	Replace all windows at State, Pleasant, and Woodbury Manor NH 4-2, AMP 1	137	341,905
	Plumbing improvements at NH 4-3, Feaster Apts. AMP 2	LS	8,910	Door replacement at State, Pleasant, and Woodbury Manor NH 4-2, AMP 1	To be determined	8,910
	Subtotal 1460		350,815	Subtotal 1460		350,815
	Subtotal of Estimated Cost		550,895	Subtotal of Estimated Cost		550,895

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2012	Work Statement for Year 2		Work Statement for Year 3	
	FFY Grant: 2013 PHA FY: 1/01/2013 – 12/31/2013		FFY Grant: 2014 PHA FY: 1/01/2014 – 12/31/2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Although there may be Management Needs, physical improvements of our housing inventory take precedence for our residents due to limited CFP funds.

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2011	Work Statement for Year 4		Work Statement for Year 5	
	FFY Grant: 2015 PHA FY: 1/01/2015 – 12/31/2015		FFY Grant: 2016 PHA FY: 1/01/2016 – 12/31/2016	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Although there may be Management Needs, physical improvements of our housing inventory take precedence for our residents due to limited CFP funds.

Attachment K

Portsmouth Housing Authority

Annual Agency Plan Fiscal Year 01/01/2012 – 12/31/2012

MINUTES RESIDENT COUNCIL MEETING AND ANNUAL PLAN UPDATE SEPTEMBER 29, 2011 12:00 P.M.

A meeting of the Resident Council convened at 12:00 P.M. on September 29, 2011, at Margeson Apartments, 245 Middle Street, Portsmouth, New Hampshire.

Six Council members attended: Shirley Corley, Bonny Sennett, Lucille Froehling, Ollegra Sterling, Patricia Dean-Flynn, and newly appointed member Shirley Sisson.

Absent: Mr. Raymond Thurber, Woodbury Manor, and Hope Aure, Gosling Meadows.

Portsmouth Housing Authority representatives attended: Joseph N. Couture (Executive Director), James M. Sheehan (Chief Financial Officer), Linda A. Asselin (Section 8 Program Manager), M. Lee Roneker (Manager Public Housing-Family 4-1 and Senior 4-2), Dee Pafford (Manager Public Housing-Senior 4-3 and 4-6), Emmanouella Vendouri (Resident Services Coordinator), Judith P. Bunnell (Senior Services Coordinator-part time), Charles Bradley (Resident Commissioner and Commissioner, Portsmouth Housing Authority Board of Commissioners), and Rhonda Schwarz (Administrative Assistant).

Mr. Couture welcomed everyone and each person introduced himself or herself. Mr. Couture then distributed the Meeting Agenda. The Agenda included Annual Plan 2012—Review; PHA Annual Plan: HUD Form 50075.1; Amendments to Admission and Continued Occupancy Policy; Amendments to Administrative Plan Housing Choice Voucher Program; and Capital Grant Program Five-Year Plan.

Mr. Couture requested that anyone having questions or comments regarding the items on the Agenda not hesitate to speak.

Mrs. Corley referencing Attachment A, Annual Agency Plan, Page 2, Designation of Public Housing Activity Description, noted item 2 Designation type had Occupancy by only the elderly checked and asked if it should be Occupancy by only elderly families and families with disabilities. Mr. Couture thanked Mrs. Corley for catching that error.

Mr. Couture reviewed line-by-line the Amendments to Admissions and Continued Occupancy Policy last revised December 2010

Amendment No. 1, Paragraph 6, Required Postings: Insert new paragraph N. to read as follows:

"N. Screening and Eviction for Drug Abuse and Other Criminal Activity Policy"

Amendment No. 2, Paragraph 12.4 Verification of Social Security Numbers: Insert the following sentence following the last sentence of the first paragraph.

"If the Portsmouth Housing Authority grants the ninety (90) day extension, the applicant family will maintain its position on the waiting list for the ninety (90) day period."

Amendment No. 3, Paragraph 15.6 Interim Reexaminations.

Delete the second sentence, which reads as follows:

"Families will not be required to report any increase in income or decrease in allowable expenses between annual reexaminations."

Insert in place thereof the following:

Families are required to report any increase or decrease in the income of any family member. The change must be reported, in writing, within ten (10) calendar days of the change.

Paragraph 3, Sentence 2, Insert the words "in writing" after the word "changes."

The revised sentence will read as follows:

The family shall report these changes, in writing, within ten (10) calendar days of their occurrence.

Paragraph 4, Sentence 3, Delete the following words: "if s/he has one"

The revised sentence will read as follows:

The individual must provide his/her Social Security Number and must verify his/her citizenship/eligible immigrant status.

Paragraph 6, Delete in its entirety.

Amendment No. 4, Paragraph 17.0 Inspections, is amended to include the following paragraph.

The PHA will document, at its discretion, either with photographs or video tape, all inspections. The photographs or video tapes will not include any persons residing in the dwelling unit and will be used solely to document the condition of the dwelling unit at the time of inspection.

Amendment No. 5, Paragraph 18.6 Pet Deposit, Delete in its entirety.

Insert the word "DELETED" so the header will read as follows:

Paragraph 18.6 DELETED

Amendment No 6, Paragraph 20.2 Termination by the Housing Authority

Subparagraph L. Delete in its entirety.

Insert in place thereof the following:

"(L)(1) Allowing a guest to remain in the assisted unit longer than 14 consecutive days or a total of 14 cumulative calendar days during any 12 month period.

Children who are subject to a joint custody arrangement or for whom a family has visitation privileges, who are not included as a family member because they live outside of the assisted household more than 50 percent of the time, are not subject to the time limitations of guests as described above. This provision will apply only when the PHA has been provided with and approved of proof of joint custody and/or visitation privileges.

A family may request an exception to this policy for valid reasons (e.g., care of a relative recovering from a medical procedure that is expected to last 40 consecutive days). An exception will not be made unless the family can identify and provide documentation of the residence to which the guest will return.

Insert subparagraph "(2)" to read as follows:

"Allowing any individuals who have been barred from PHA property to be on PHA premises or in a PHA dwelling unit. The names of persons barred from PHA properties are posted in all PHA site offices."

Add a new paragraph 24.0 as follows:

"24.0 Screening and Eviction for Drug Abuse and Other Criminal Activity Policy"

Insert the following before the body of the Policy:

"In the event of an inconsistency between the SEDACA Policy and other provisions of this ACOP, the more stringent provision will apply."

Amendment No. 8, Table of Contents, Revised Table of Contents to reflect foregoing Amendments.

Mr. Couture asked if there were any questions. There were not any questions.

Mr. Couture reported that the Admissions and Continued Occupancy Plan (ACOP) and Section 8 Administrative Plan Housing Choice Voucher Program must agree.

Mr. Couture reviewed the Amendments to Section 8 Administrative Plan Housing Choice Voucher Program and again requested those in attendance not hesitate to ask questions or comment.

Amendment No. 1, Paragraph 3-J. Guests

PHA Policy

Insert the following at the end of the second paragraph.

This provision will apply only when the PHA has been provided with and approved of proof of joint custody and/or visitation privileges.

Amendment No. 2, Paragraph 3-P. Social Security Numbers [24 CFR 5.216 and CFR 5.218]

Delete in its entirety and insert in place thereof the following

In accordance with 24 CFR 5.216, applicants and participants (including each member of the household are required to disclose his/her assigned SSN, with the exception of the following individuals:

- a. Those individuals who do not contend to have eligible immigration status (individuals who may be unlawfully present in the United States). These individual in most instance would not be eligible for a SSN.
 1. A family that consists of a single household member (including a pregnant individual who does not have eligible immigration status is not eligible for housing assistance and cannot be housed.
 2. A family that consists of two or more household members and at least one household member that has eligible immigration status, is classified as a mixed family, and is eligible for prorated assistance in accordance with 24 CFR 5.520. The PHA may not deny assistance to mixed families due to nondisclosure of an SSN by an individual who does not contend to have eligible immigration status.
- b. Existing program participants as of January 31, 2010, who have previously disclosed their SSN and HUD has determined the SSN to be valid. PHAs may confirm HUD's validation of the participant's SSN by viewing the household's Summary Report or the Identity Verification Report in the EIV system.
- c. Existing program participants as of January 31, 2010, who are 62 years of age or older, and had not previously disclosed a valid SSN. This exemption continues even if the individual moves to a new assisted unit..

All additional requirements of PIH 2010-3 or its successor issuance(s) apply.

PHA Policy

Prior to admission, every family member regardless of age must provide the Portsmouth Housing Authority with a complete and accurate Social Security Number unless they do not contend eligible immigration status. New family members must provide this verification prior to being added to the lease. If the new family member is under the age of six and has not been assigned a Social Security Number, the family shall have ninety (90) calendar days after starting to receive the assistance to provide a complete and accurate Social Security Number. The Portsmouth Housing Authority may grant one ninety (90) day extension if in its sole discretion it determines that the person's failure to comply was due to circumstances that could not have reasonable been foreseen and was outside the

control of the person. If the Portsmouth Housing Authority grants the ninety (90) day extension, the applicant family will maintain its position on the waiting list for the ninety (90) day period.

If a person is already a program participant and has not disclosed his or her Social Security Number, it must be disclosed at the next re-examination or re-certification. Participants aged 62 or older as of January 31, 2010 whose initial eligibility determination was begun before January 31, 2010 are exempt from the required disclosure of their Social Security Number. This exemption continues even if the individual moves to a new assisted unit.

The best verification of the Social Security Number is the original Social Security card. If the card is not available. The Portsmouth Housing Authority will accept an original document issued by a federal or state government agency, which contains the name of the individual and the Social Security Number of the individual, along with other identifying information of the individual or such other evidence of the Social Security Number as HUD may prescribe in administrative instructions.

If a member of an applicant family indicates they have Social Security Number, but cannot readily verify it, the family cannot be assisted until verification is provided.

If an individual fails to provide the verification within the time allowed, the family will be denied assistance or will have their assistance terminated if in its sole discretion it determines that the person's failure to comply was due to circumstances that could not have reasonably been foreseen and there is a reasonable likelihood that the person will be able to disclose a Social Security Number by the deadline.

Amendment No. 3, Paragraph 7-G Social Security Number [24 CFR 5.216 and CFR 5.218]

Delete the words "age 6 or older" in the first sentence.

PHA Policy

Delete in its entirety and insert in place thereof the following:

- a. An original SSN card issued by SSA.
- b. An original SSA-issued document, which contains the name and SSN of the individual; or
- c. An original document issued by a federal, state, or local government agency which contains the name and SSN of the individual.

Amendment No. 4, Paragraph 11-E. Changes in Family and Household Composition

New Family Members Not Requiring Approval

PHA Policy

Delete the word "business" in both paragraphs and insert in place thereof the word "calendar" in both paragraphs.

Amendment No. 5, Paragraph 11-F. Changes Affecting Income or Expenses

Required Reporting

PHA Policy

Delete the first paragraph which reads as follows:

Families are required to report all increases in earned income, including new employment, within 10 business days of the date the change takes effect.

Insert in place thereof the following:

Families are required to report all increases or decreases in income, including new employment, and increases or decreases in allowable expenses within 10 calendar days of the date the change takes effect.

Delete the second and third paragraphs in their entirety.

Optional Reporting

PHA Policy

Delete in its entirety.

Amendment No. 6, Paragraph 11-G. Criteria for Deciding to Terminate Assistance

At Consideration of Circumstances

Insert the following at the end of PHA Policy

"VAWA Protections"

Under the Violence Against Women Act (VAWA), Housing Choice Voucher Program participants have the following specific protections, which will be observed by the Portsmouth Housing Authority:

An incident or incidents of actual or threatened domestic violence dating violence, or stalking will not be construed as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of abuse.

Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse.

Notwithstanding the VAWA restrictions on admission, occupancy, or terminations of occupancy or assistance, or any Federal, State or local law to the contrary, a PHA may terminate assistance to or an owner or manager may "bifurcate" a lease, or otherwise remove a household member from a lease, without regard to whether a household member is a signatory to the lease in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others. This action may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance under the housing choice voucher program.

Nothing in VAWA may be construed to limit the authority of a public housing agency, owner, or manager, when notified, to honor court orders addressing rights of access or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members in cases where a family breaks up.

Nothing in VAWA limits any otherwise available authority of an owner or manager to evict or the public housing agency to terminate assistance to a tenant for any violation of a lease not premised on the act or acts of violence in question against the tenant or a member of the tenant's household, provided that the owner, manager, or public housing agency does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate.

Nothing in VAWA may be construed to limit the authority of an owner or manager to evict, or the public housing agency to terminate assistance, to any tenant if the owner, manager, or public housing agency can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted or terminated from assistance.

Nothing in VAWA shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than VAWA for victims of domestic violence, dating violence, or stalking.

Verification of Domestic Violence, Dating Violence or Stalking

The Portsmouth Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority.

Mr. Couture noted the various means to verify a claimed incident or incidents and explained that VAWA prevents housing authorities from taking action against victims of abuse and stressed confidentiality for victims.

Amendment No. 8, Paragraph 17-G. Informal Hearings for Participants [24CFR982.5551]

PHA Policy

Second sentence insert the following words "registered, return receipt requested" after the words "postage pre-paid" and delete the words "with an affidavit of mailing enclosed."

Third sentence, delete the words "and a copy of the proof of mailing."

Amendment No. 9, Add a new Chapter 19 as follows:

"Chapter 19: SCREENING AND EVICTION FOR DRUG ABUSE AND OTHER CRIMINAL ACTIVITY POLICY"

Insert the following before the body of the Policy.

"In the event of an inconsistency between the SEDACA Policy and other provisions of this Admin Plan, the more stringent will apply."

Amendment No. 10, Table of Contents, Revised Table of Contents to reflect foregoing Amendments.

Mr. Couture asked if there were any other questions or comments, there were none.

Mr. Couture continued with review of the Plan Update

6.0. Mr. Couture reported there were no changes to Rent Determinations, Pets, and noted that the VAWA Statement was attached.

Mr. Couture asked if there were any questions or comments relative to the Waiting Lists and income types. There were none.

During review of goals and progress, Mr. Couture stated that the Portsmouth Housing Authority continues to be a high performer.

Review continued, with Mrs. Flynn inquired about purchasing the Keefe House (10.0 Goal: Expand the Supply of Assisted Housing) with Mr. Couture reporting that inquiries were made but at this time not financially feasible and noted that PHA would like to keep that option on the table.

Attachment A, Designation of Public Housing – discussed previously.

Attachment B, VAWA Report – discussed previously.

Attachment C, Intent to Use Project-Based Assistance. Mr. Couture reported that PHA has 406 vouchers and that they plan to project-base some of those vouchers and that we are going through the process now with Wamesit Place. Mr. Couture noted that nothing changes for the tenant.

Items noted in review of the Capital Fund Program – Five-Year Action Plan, form HUD-50075.2: Replace roofs at Gosling Meadows and replace elevators.

Mr. Couture asked for questions regarding the review or other issues of concern.

Mrs. Froehling commented on problems with people propping open the back door at Atlantic Heights. Mrs. Murphy, Property Manager, will send another notice to residents and again post it at the entrances.

Ms. Sennett expressed her appreciation for the cameras at the entrances of the high rise building but stated that she would like them in the hallways and exterior of the buildings. Mr. Couture advised that Mr. Thurber of Woodbury Manor expressed the desire for cameras at Woodbury Manor.

Mrs. Sisson stated that although she is new to the Board she has been a resident of the Housing Authority for eleven years and feels blessed to have such a wonderful staff at the Authority and that she is glad for the cameras throughout Gosling Meadows.

Mr. Couture noted that cameras would be installed at Wamesit Place in the spring of 2012.

Mrs. Flynn requested repair of a hole at the end of the parking lot of Connors Cottage to which Mr. Couture stated that the City of Portsmouth would be contacted as they are responsible for that parking area.

Mrs. Froehling commented on confusion with parking at Atlantic Heights—only four handicapped spaces which visitors do not realize those are for residents. Mr. Couture advised that there is a \$250.00 fine for parking in a HC parking space when not authorized.

Discussion ensued regarding a family development being built abutting Atlantic Heights with Mrs. Froehling stated notices are received prior to dynamiting. It is loud but they know it is temporary and better than the first development that had been planned for the area.

Mr. Couture reported that smoke detection machines were going to be purchased by the Housing Authority to which Ms. Pafford advised that confirmation of order had been received. Mr. Couture stated that the machines were sensitive to cigarette smoke—able to detect it twelve hours after the fact.

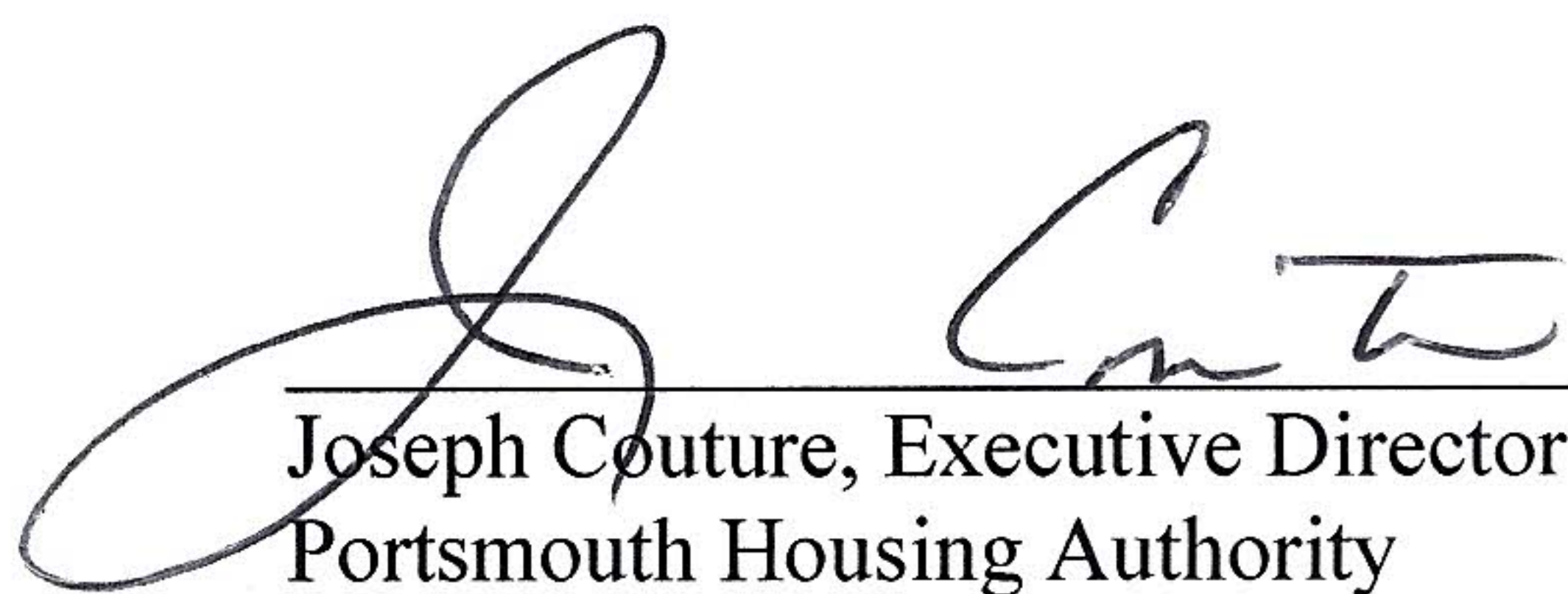
Mrs. Sterling, Wamesit Place, requested computers be set up for use with the school programs being provided through the Youth Programs. Ms. Vendouri, Resident Services Youth Coordinator, advised that computers are in future plans but funding at this time prevented their purchase.

Ms. Vendouri reported that efforts were underway to obtain more funds, e.g. looking for more sources.

Mrs. Sterling stated that she is very anxious for cameras be installed at Wamesit Place. Some children skate board stretched out on their skate boards and drivers cannot see them. In addition, Mrs. Sterling requested peep holes be installed as the newly installed doors do not have peep holes.

Discussion ensued relative to parenting skills or lack thereof in some cases, with Ms. Pafford advising that Families First offers parenting classes for parents, grandparents, and that these classes also pertain to the caring of infants.

The Meeting adjourned at 1:15 P.M.



Joseph Couture, Executive Director
Portsmouth Housing Authority

October 12, 2011

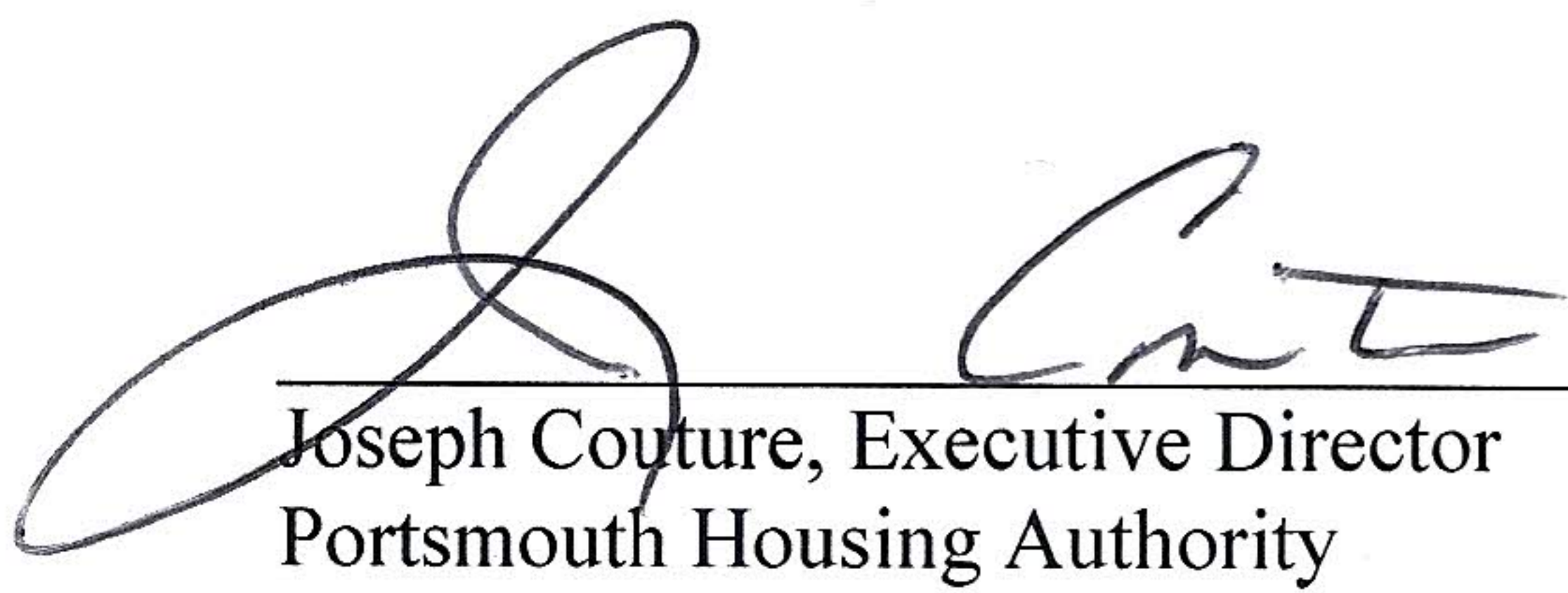
Attachment L

Portsmouth Housing Authority

**Annual Agency Plan
Fiscal Year 01/01/2012 – 12/31/2012**

Challenged Elements

There were no challenged elements to the Housing Authority's Annual Plan



Joseph Couture, Executive Director
Portsmouth Housing Authority

October 12, 2011